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APPLICANTS

Santanu Basu, Rancho Palos Verdes, CA;

** CONTINUING DATA *****
none

** FOREIGN APPLICATIONS *****
none

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 25	TOTAL CLAIMS 42	INDEPENDENT CLAIMS 6
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Verified and Acknowledged

Examiner's Signature: *[Signature]* Initials: *[Initials]*

ADDRESS
 027256
 ARTZ & ARTZ, P.C.
 28333 TELEGRAPH RD.
 SUITE 250
 SOUTHFIELD, MI
 48034

TITLE
 AUTONOMOUSLY ASSEMBLED SPACE TELESCOPE

FILING FEE RECEIVED 1424	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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